

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD

2009 FEB 23 AM 8:39

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Disney for Iowa House

**IMPORTANT:** Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Larry Disney

Political Party (if applicable)

Republican

Office Sought

Iowa House

District (if Senate or House)

67

FORM

**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

1805

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Wally E  
SIGNATURE OF PERSON FILING REPORT

515-244-9945  
TELEPHONE

2-19-09  
DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED 10-14-08

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) 2345.

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) 2,370.00

Schedule F: Loans Received total (Attach Schedule F) 5,875.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL 8,245.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) 3,621.00

Schedule F: Loan Repayments total (Attach Schedule F) 0

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) 4,623.89

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) 0

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) 0

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) 0

CONSULTANT BREAKDOWN (Schedule G Attached?)

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) 0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE  
**B**  
(Rev. 07/03)

MONETARY  
EXPENDITURES

☒ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Disney for Iowa House

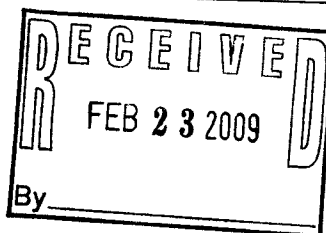
Total is only change

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/22/08	ID# CK# 1002	Des Moines Stamp Co.	Deposit Stamp	\$ 27.45
7/22/08	ID# CK# 1003	Koch Brothers	Printing Letters	\$ 284. <sup>08</sup> / <sub>100</sub>
7/22/08	ID# CK# 1004	Postmaster	Stamps for 1st mailing	\$ 126. <sup>00</sup> / <sub>100</sub>
8/24/08	ID# CK# 1005	Saber Communications	Consulting	\$ 500. <sup>00</sup> / <sub>100</sub>
8/24/08	ID# CK# 1006	G.P. Printing	Brochures Printing	\$ 669. <sup>67</sup> / <sub>100</sub>
8/29/08	ID# CK# 1007	DMPS Community Education	Room Rental for Fundraiser	\$ 348. <sup>00</sup> / <sub>100</sub>
9/22/08	ID# CK# 1008	Victory Enterprises	Yard Signs	\$ 606. <sup>05</sup> / <sub>100</sub>
7/27/08	ID# CK# 1051	Sam's Club	Toner Cartridge	\$ 59.96
SUB-TOTAL				\$ 2621.11
TOTAL (if last page of this schedule)				\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)



Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Disney For Iowa House

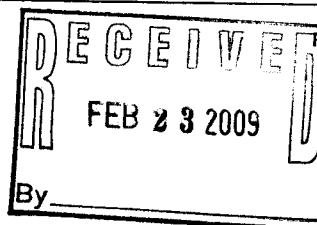
total is only change

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8-6-08	ID# CK# 1052	Saber Communications	Consulting services	\$ 500. <sup>00</sup>
10-14-08	ID# CK# 1076	Saber Communications	Consulting Services	\$ 500. <sup>00</sup>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1000. <sup>00</sup>
TOTAL (if last page of this schedule)				\$ 3421. <sup>00</sup>

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)



Page 2 of 2

(for Schedule B)

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

0319

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
pm 10-17  
2008 OCT 20 AM 10:21

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Disney For Iowa House

**IMPORTANT:** Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

**Candidate Name**

Larry Disney

**Political Party (if applicable)**

Republican

**Office Sought**

Iowa House of Representatives

**District (if Senate or House)**

**FORM**

**DR-2**

(Rev. 07/2007)

**DISCLOSURE  
REPORT**

**For Office Use Only**

**Comm. #**

1805

**Logged In**

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**Computer**

WKS

**Audited**

1-9-09

7 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Wally Em  
**SIGNATURE OF PERSON FILING REPORT**

515-299-9995  
**TELEPHONE**

10-14-08  
**DATE SIGNED**

I AM FILING A October 14<sup>th</sup> 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

2,370.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

\$5,875.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**

\$

8,245.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

s/b 3621.11

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

\$3,675.55

Schedule F: Loan Repayments total (Attach Schedule F)

0

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

4,569.44

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

0

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

0

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

0

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

X

**YES** **NO**

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset

SCHEDULE	
<b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Disney For Iowa House

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/20/08	ID# CK# 595	Jeffery Lambert 2021 NW 17 <sup>th</sup> St. Ankeny, IA 50021		\$ 250. <sup>00</sup>	<input type="checkbox"/>
8/27/08	ID# CK# 7373	Lewis or Carol Olson 3001 Summit Dr. Des Moines, IA 50312		\$ 50. <sup>00</sup>	<input type="checkbox"/>
8/27/08	ID# CK# 014792	Gerald Kirke 5465 Mills Cir NW West Des Moines, IA 50266		\$ 500. <sup>00</sup>	<input type="checkbox"/>
8/30/08	ID# CK# 5150	Paul McKinley 21884 - 483 Ln. Chariton, IA 50049		\$ 100. <sup>00</sup>	<input type="checkbox"/>
7/30/08	ID# CK# 2510	Roger and Connie Halverson 82 North St. Marquette, IA 52158		\$ 100. <sup>00</sup>	<input type="checkbox"/>
8/15/08	ID# CK#	Donald and Virginia Philipson 1110 SW Hughes Des Moines, IA 50315		\$ 10. <sup>00</sup>	<input type="checkbox"/>
8/16/08	ID# CK#	Glenn Miller 2571 Guthrie Ave. Apt 19C Des Moines, IA 50317		\$ 25. <sup>00</sup>	<input type="checkbox"/>
8/16/08	ID# CK#	Loras Schulte 305 Apache Dr. Norway, IA 52310		\$ 100. <sup>00</sup>	<input type="checkbox"/>
8/21/08	ID# CK#	Kathryn Scher 161 Constitution Blvd. Pleasant Hill, IA 50327		\$ 5. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
8/21/08	ID# CK#	Leroy Pouchon 6767 NE Rising Sun Dr. Pleasant Hill, IA 50327		\$ 20. <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$ 1160.<sup>00</sup>/<sub>100</sub>

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3  
(for Schedule A)

For Instructions, See Back of Form

Reset

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Disney for Iowa House

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8-21-08	ID# CK#	Stuart Stickler RR 1 Box 67 A Williams town, Mo 63473		\$ 50. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
8-21-08	ID# CK#	Brenna Findley 1421 HWY 925 Dexter, IA 50070		\$ 100. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
8-21-08	ID# CK#	Robert & Betty Johnson 5150 Oakwood Dr. Pleasant Hill, IA 50327		\$ 50. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
8-21-08	ID# CK#	Iris Swanson 4440 Ash Dr. Pleasant Hill, IA 50327		\$ 25. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
8-21-08	ID# CK#	Andrew Hanson 4301 Park Ave Unit # 630 Des Moines, IA 50327		\$ 25. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
7-22	ID# CK# 4895	Michael Cook 4600 University Ave. Apt #1 Des Moines, IA 50311		\$ 25. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
7-29	ID# CK# 1105	Richard & Cath V Rogers 2417 Fuller Rd. West Des Moines, IA 50265		\$ 30. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
10-3-08	ID# 9161 CK# 23188	Republican Party of Iowa State Grant 621 Grant St Des Moines, IA 50300		\$ 4,000. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
10-13-08	ID# CK# 2438	Galen Kessler 4621 Grant Circle Pleasant Hill, IA 50327		\$ 20. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>
10-12-08	ID# CK# 8350	Phil & Norma Hilderbrand 300 Edgewood Lane Pleasant Hill, IA 50327		\$ 25. <sup>00</sup> / <sub>100</sub>	<input type="checkbox"/>

SUB-TOTAL

\$ 4,300.<sup>00</sup>/<sub>100</sub>

**TOTAL** (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 3  
(for Schedule A)

For Instructions, See Back of Form

Reset

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Disney For Iowa House

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-13-08	ID# CK# 3506	Lowell & Marilyn Kramme 4653 NE 46th St. Des Moines, IA 50317		\$25.00	<input type="checkbox"/>
10-5-08	ID# CK# 1843	Laurence Smith 7435 Camino Rialto La Jolla, CA 92037		\$50.00	<input type="checkbox"/>
9-26-08	ID# CK# Cash	Ed Hofstrand 7214 S. Williams Ln. South Range, WI 54674		\$265.00/100	<input type="checkbox"/>
7-17-08	ID# CK# On-line	Jo Thoburn 1406 Crowell Rd. Vienna, VA 22182		\$25.00/100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$365.00  
\$5875.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 3  
(for Schedule A)

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Disney for Iowa House

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/22/08	ID# CK# 1002	Des Moines Stamp Co.	Deposit Stamp	\$ 27.45
7/22/08	ID# CK# 1003	Koch Brothers	Printing Letters	\$ 284. <sup>08</sup> / <sub>100</sub>
7/22/08	ID# CK# 1004	Postmaster	Stamps for 1 <sup>st</sup> mailing	\$ 126. <sup>00</sup> / <sub>100</sub>
8/24/08	ID# CK# 1005	Saber Communications	Consulting	\$ 500. <sup>00</sup> / <sub>100</sub>
8/24/08	ID# CK# 1006	O.P. Printing	Brochures Printing	\$ 669. <sup>67</sup> / <sub>100</sub>
8/29/08	ID# CK# 1007	DMPs Community Education	Room Rental for Fundraiser	\$ 348. <sup>00</sup> / <sub>100</sub>
9/22/08	ID# CK# 1008	Victory Enterprises	Yard Signs	\$ 606. <sup>05</sup> / <sub>100</sub>
7/27/08	ID# CK# 1051	Sam's Club	Toner Cartridge	\$ 59.96
SUB TOTAL				\$ 2675.56
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)



Reset Form

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Disney For Iowa House

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8-6-08	ID# CK# 1052	Saber Communications	Consulting Services	\$ 500. <sup>00</sup>
10-14-08	ID# CK# 1076	Saber Communications	Consulting Services	\$ 500. <sup>00</sup>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
313 3621.11 SUB-TOTAL				\$ 1000. <sup>00</sup>
TOTAL (if last page of this schedule)				\$ 3,675. <sup>56</sup>

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

**G**

### BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT

(Rev. 02/08)

☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME**(Must be same as on Statement of Organization)

# Disney For Iowa House

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant

## Saber Communications

**Mailing Address**

101 Washington St.

City

Falmouth

## State

VA

**Zip Code**

22405

**CONTRACT PERIOD (MM/DD/YR)****TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE**

From 6-1-08

To 11-4-08

\$ 500.<sup>00</sup> Per Month

## ESTIMATES OF PERFORMANCE

Campaign Strategy, List Management, General Services.

**PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)**

<p>NOTE: (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)</p>			
DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$
SUB-TOTAL			\$
TOTAL (If last page of this schedule)			\$